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## ABSTRACT

This document contains information about and from a conference on addressing the training and employment needs of youth with mental health disabilities in the juvenile justice system that was held by the National Mental Health Association (NMHA). The document begins with an executive summary and nine recommendations for the Youth Subcommittee of the Presidential Task Force on Employment of Adults with Disabilities. The introduction provides an overview of the conference objectives and proceedings. Presented next are the following presentations: "The Prevalence of Mental Health Disabilities among Youth in the Juvenile Justice System" (Peter Leone); "Description of Employment and Training Needs and Challenges among Youth in the Juvenile Justice System" (David Brown, John Savage, Edward DeJesus); "The Implications of Disability Law for the Training and Employment of Youth with Disabilities in the Juvenile Justice System" (Joseph Tulman); "Panel Presentation: Perspectives on Needs and Barriers" (Gerald Rouse, Phyllis Eisen, Lili Garfinkel, Kurt Bumby, John McKinney, Jeremy Reed); "Description of Promising Programs for Youth with Mental Health Disabilities in the Juvenile Justice System" (LaWanda Ravoira, Becky Anderson, Claudia Lann Valore, Deanne Unruh, David Montesano); "General Discussion about Promising Programs"; "NMHA Closing Comments"; "Context for Recommendations: Activities of the Presidential Task Force on Employment of Adults with Disabilities" (Michael Reardon); and "Closing Discussion." Concluding the

document are lists of the meeting participants and addresses of 14 resource organizations. (MN)

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**National  
Mental  
Health  
Association**

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ED 452 426

# **Addressing the Training and Employment Needs of Youth with Mental Health Disabilities in the Juvenile Justice System**

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Conference Proceedings with Recommendations  
to the Presidential Task Force on Employment of  
Adults with Disabilities

March 3-4, 2000



BEST COPY AVAILABLE

June 2000

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## Executive Summary

Although youth with mental health disabilities in the juvenile justice system have a great need for vocational training and employment programs, they are least likely to have access to these opportunities or to be able to benefit from the standard programming offered by many juvenile justice systems. The combination of disability and juvenile justice involvement make it particularly difficult for youth to compete for and maintain employment.

At the same time, the challenges of serving this population—and developing job opportunities for them in the community—mean that many of these young people receive little or no assistance as they attempt to negotiate the transition into the world of work and self-sufficiency, and away from a life of crime and dependency. Without training and employment, these youth are likely to cycle in and out of the juvenile and eventually the adult justice systems, as well as the public mental health and other social service systems.

In recognition of employment and training needs of this vulnerable population of youth, the **Presidential Task Force on Employment of Adults with Disabilities** supported the **National Mental Health Association** in convening a working group of key stakeholders, on March 3-4, 2000, to develop policy recommendations for the Task Force's Youth Subcommittee.<sup>1</sup> Fifty-five participants—including experts in special education, disability law, juvenile justice, mental health, policy, youth employment, and advocacy—attended a 1½-day “working meeting.” Activities included several individual presentations, a panel focusing on barriers and challenges, presentations featuring four promising employment programs, and substantial facilitated discussion.

**Michael Faenza**, President and CEO of the National Mental Health Association, and **Rebecca Ogle**, the Executive Director of the Presidential Task Force on Employment of Adults with Disabilities, welcomed the participants and outlined the purpose of the working meeting. Ms. Ogle noted that mental health has recently been a focus of the Task Force, which has recognized that too many youth with mental health disabilities do not receive the services they need and are at risk for ending up in the juvenile justice system.

**Peter Leone, Ph.D.**, from the University of Maryland, Department of Education, began the meeting with a presentation on the prevalence of mental health disabilities among youth in the juvenile justice system. Dr. Leone is the Director of a new center, supported by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) within the U.S. Department of Justice and the Office of Special Education Programs (OSEP) within the U.S. Department of Education, called the National Center on Education, Disability, and Juvenile Justice. According to Dr. Leone, a large number of youth in the juvenile justice

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<sup>1</sup> Expanding Employment Opportunities for Young People with Disabilities Subcommittee of the Access to Employment and Lifelong Learning Committee

system have serious mental health problems, and mental illness and substance abuse frequently co-occur among youthful offenders. An estimated 70-90 percent of youth suffer from mental illness—much higher than the estimated 10-20 percent for the non-delinquent youth population. Among the most common diagnoses in the juvenile offender population are conduct disorder, alcohol dependence, major depression, attention deficit hyperactivity disorder (ADHD), bipolar disorder, and post-traumatic stress disorder. In too many cases, the juvenile justice system contributes to the problems that youth experience, however. For example, mental health services are inadequate and youth may be trained in non-transferable skills, leaving them unprepared for the existing job market. Although there is no “one-size-fits-all” solution, common elements of successful community-based alternative programs for juvenile offenders with mental health needs include intensive individualized attention and community-wide, multi-agency collaboration. In juvenile correctional facilities, education and training should be institutional priorities.

**David Brown**, Deputy Director of the National Youth Employment Coalition, chaired a panel presentation on employment and training needs and challenges among youth in the juvenile justice system. Mr. Brown has been collaborating with **John Savage** of the Center on Juvenile and Criminal Justice and **Edward DeJesus** of the Youth Development and Research Fund on a joint effort to identify and examine effective employment programs for justice-involved youth. The group emphasized that, although there are some promising employment programs that serve youth in the juvenile justice system, few focus on serving youth with mental health disabilities. In addition, justice system-involved youth are typically left out of programs and services mandated by the Workforce Investment Act (WIA). According to Mr. Brown, characteristics of effective employment programs for juvenile offenders include: collaboration across public agencies, willingness to be flexible in the design of systemic efforts, common promotion of the youth development approach, creativity around new and innovative programming, ability to redefine service delivery, and the ability to locate a variety of funding sources.

**Joseph Tulman**, from the David A. Clarke School of Law at the University of the District of Columbia, reviewed the implications of disability law for the training and employment of youth with disabilities in the juvenile delinquency system. According to Mr. Tulman, special education services must be available to youth with mental health disabilities in the juvenile justice system; most facilities fail to provide them, however in violation of IDEA. He pointed out that children with disabilities and their families are often the least prepared to advocate for their rights in the juvenile justice system. Almost all of the “ideal” services that work group participants felt would be beneficial for youth with mental health disabilities in the justice system (e.g. independent tutoring, life skills training, and integrated case management) could be provided as transition and related services under IDEA. It is the responsibility of the juvenile justice system as the custodian of a child to identify disabilities and ensure that youth receive the services to which they are entitled. Mr. Tulman suggested a number of potential remedies for obtaining these services, including seeking compensatory education, using Section 504 of the ADA, and developing a case aggregation approach, starting with grassroots organizing to train attorneys and identify large numbers of cases within a particular jurisdiction.

The second day of the meeting began with a panel presentation on needs and barriers, representing a diverse array of perspectives. Key challenges and strategies identified by participants in this panel included:

- From the judicial perspective (**The Honorable Gerald Rouse**, National Council of Juvenile and Family Court Judges), there is a need for training to work with youth with mental health disabilities in general, as well as a need for more specific information (in the form of accurate mental health evaluations) on the needs of individual youth.
- From the employer perspective (**Phyllis Eisen**, National Association of Manufacturers), the tight labor market has resulted in a greater focus on developing new workers. The demands of a modern, entry-level manufacturing position, however, may present a challenge for youth with mental health disabilities.
- From the advocate perspective (**Lili Garfinkel**, PACER Center), families must be engaged in the process. By providing appropriate services to youth with mental health disabilities, schools can prevent them from entering the juvenile justice system; by providing adequate transition services, the juvenile justice system can help youth reenter society successfully.
- From the juvenile corrections perspective (**Kurt Bumby**, Missouri Division of Youth Services), a philosophical shift is necessary. Juvenile justice system professionals must take responsibility for addressing the diverse problems and skills deficits these young people have if youth with mental health disabilities are going to have a chance of finding and keeping employment. Collaboration with universities and employers is essential.
- From the family perspective (**Jacki McKinney**, Federation of Families for Children's Mental Health), wraparound services—including services which are family-driven and culturally competent—are necessary, and youth should not have to be arrested in order to receive these services.
- From the youth perspective, (**Jeremy Reed**, a graduate of the Positive Education Program), school-to-work programs can make a tremendous difference. The greatest impact comes from caring adults who take time to listen and provide consistent support.

This panel was followed by descriptions of several promising programs for youth with mental health disabilities in the juvenile justice system.

**LaWanda Ravoir** described the PACE Center for Girls which provides gender-specific services to girls and young women who are involved in or at risk of entering the juvenile justice system. PACE is a non-residential, community-based diversion program which emphasizes creating an academic environment that honors the learning styles of girls and young women. In addition to the

specialized academic curriculum, PACE provides comprehensive case management and counseling that incorporates family involvement.

**Becky Anderson** described Project CRAFT, a national training program for high-risk and adjudicated youth that teaches youth hands-on skills in the construction trade. Youth participants in Project CRAFT, developed by the Homebuilders Institute of the National Association of Homebuilders, receive pre-apprenticeship training in residential construction trades, job placement, and follow-up services, as well as other supportive services as needed.

**Claudia Lann Valore** described the Positive Education Program (PEP), which provides integrated special education and mental health services to children and adolescents, including many children at risk for or who have had contact with the juvenile justice system. PEP is based on the “re-education” model which emphasizes parent and family involvement, competency building, focus on strengths and choice, and self-determination.

**Deanne Unruh** and **David Montesano** presented Project SUPPORT, a program which employs transition specialists to serve youth with disabilities exiting out of juvenile corrections facilities in the state of Oregon. Although this program is still in its pilot phase, the approach is based on a thorough needs assessment process and involves a collaborative effort between the Department of Vocational Rehabilitation, the Department of Education, and the Oregon Youth Authority.

During the final segment of the meeting, participants were asked to identify significant **policy barriers** and recommendations to address the employment and training needs of youth with mental health disabilities in the juvenile justice system. Policy barriers were identified at the Federal, state and local, and program levels. Barriers identified at the Federal level included:

- Statutory requirements which do not allow Federal agencies the flexibility to pool funds. Silos of funding—coming down from the federal level—make collaboration on the state and local levels difficult, creating an “excuse” for fragmented services.
- Income eligibility criteria for Medicaid which leave some families of children with complex mental health needs unable to pay for needed or court-ordered services.
- Restrictions on the use of Medicaid dollars to pay for services for youth in juvenile justice facilities.

## **Recommendations for the Youth Subcommittee of the Presidential Task Force on Employment of Adults with Disabilities**

- ❖ **Ensure inclusion of youth with mental health disabilities—and particularly those with juvenile justice system involvement—in existing Federal youth employment programs.**

*Immediate steps:* Work with member agencies of the Subcommittee to review the extent to which existing Federal youth employment programs are serving youth with mental health disabilities, particularly those who are out of school and/or have had juvenile justice system involvement.

*Short-term activities:* Work through the Subcommittee to develop an interagency plan to better engage these youth in existing employment programs. This plan should identify barriers to the involvement of these youth in existing programs, as well as strategies for addressing the barriers.

*Long-term activities:* Implement the interagency plan by, for example, providing technical assistance to state and local workforce staff—and juvenile justice system personnel—to ensure the inclusion of youth with mental health disabilities and juvenile justice involvement in the programs and services mandated by the Workforce Investment Act.

- ❖ **Expand upon existing Federally funded training initiatives, in order to better prepare employers, workforce development professionals, and juvenile justice system practitioners to serve youth with mental health disabilities.**

*Immediate steps:* Work through the Subcommittee to identify existing initiatives through which specialized training could be delivered to key stakeholders including juvenile justice system personnel (e.g. training of juvenile justice administrators, administered by the National Institute of Corrections, in partnership with the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice).

*Short-term steps:* Member agencies should work through these existing initiatives to develop training modules or curricula that would address the challenges faced by youth with mental health disabilities, particularly those who have become involved in the juvenile justice system.

*Long-term steps:* Implement training of juvenile justice personnel (including juvenile judges) regarding employment issues and mental health disability; train workforce personnel and employers regarding mental health disability, reasonable accommodations, and juvenile justice system issues.

- ❖ **Increase public awareness of the challenges faced by youth with mental health disabilities, particularly those who have become involved with the juvenile justice system.**

*Immediate steps:* Incorporate messages relevant to this population into existing Federally supported public education campaigns, e.g. the National Mental Health Awareness Campaign. Raise issues relevant to this population in diverse forums, including the National Transition Summit on Young People with Disabilities.

Key messages identified by the working group included:

- The mental health and employment needs of youth in the juvenile justice system should be an issue of national concern.
- The reduction of youth violence demands public attention to the mental health and employment needs of at-risk and justice system-involved youth.
- Employment is a deterrent to youth crime.
- Youth with mental health disabilities must be integrated into all services, without exception.

*Short-term activities:* Facilitate a series of forums or town hall meetings, e.g. among youth with mental health disabilities who have been involved with the juvenile justice system. Further discussion between employers should be stimulated as well, so that they can share fears, concerns, and positive experiences in hiring youth with mental health disabilities and juvenile justice system involvement.

*Long-term activities:* Develop educational materials targeting employers, juvenile justice system practitioners, and families that address the challenges faced by youth with mental health disabilities in the juvenile justice system as they transition into adulthood and the workforce. Consider the development of a national public education campaign specifically targeting the mental health and employment needs of youth in the juvenile justice system.

❖ **Identify and disseminate “best practices” in employment and training for youth with mental health disabilities, particularly those in the juvenile justice system.**

*Short-term activities:* Work through the Subcommittee to identify best practices—in terms of services and policy—across Federal agencies, including “lessons learned” from existing interagency demonstration projects. Key agencies (e.g. ETA, CMHS, OJJDP) should consider convening a joint meeting of their respective grantees, to develop a consensus on best practices in employment and training for youth with mental health disabilities. In addition, work with diverse associations to identify exemplary practices among their constituencies (e.g. National Council of State Legislatures, National League of Cities, National Association of Counties).

Best practices should include:

- examples of interagency collaboration and joint funding
- successful efforts to recruit and retain qualified line staff
- family involvement in service development and provision
- juvenile justice diversion programs for youth with mental health disabilities
- ombudsman programs within the juvenile justice system

- supported employment, job coaching / job shadowing
- the implementation of individualized service plans for juvenile offenders
- family and youth advocate programs for juvenile offenders and their caregivers

*Long-term activities:* In partnership with other stakeholders, integrate and widely disseminate best practices in employment and training for youth with mental health disabilities, particularly those involved in the juvenile justice system. Support further research in areas where “best practices” information is not yet available.

❖ **Increase interagency collaboration to better meet the employment and vocational training needs of youth with mental health disabilities, particularly those who have come into contact with the juvenile justice system.**

*Immediate steps:* Ensure adequate representation by juvenile justice and mental health agencies on the Youth Subcommittee of the Task Force.

*Short-term activities:* Work through the Subcommittee to foster the development of interagency partnerships, particularly ones involving juvenile justice and mental health.

*Long-term activities:* Initiate a Federal interagency demonstration project that would enable local communities to blend funding from different Federal agencies in order to better address the employment and training needs of youth with mental health disabilities and juvenile justice system involvement.

❖ **Clarify existing Federal resources and incentives programs that might benefit youth with mental health disabilities, particularly those with juvenile justice system involvement.**

*Immediate steps:* Work through the Subcommittee to identify existing resources and incentives programs which could benefit these youth, as they transition into adulthood and the workforce, as well as their families and potential employers. Examples of such resources identified by the work group include incentives and benefits programs targeting employers of youth with disabilities and the newly created Ticket-to-Work and Self-Sufficiency Program.

*Short-term activities:* Develop more user-friendly resources to educate prospective employers, youth with mental health disabilities (particularly those who have become involved with the juvenile justice system), and their families about existing resources and opportunities.

*Long-term activities:* Work to expand benefits and incentives programs that would encourage more youth with mental health disabilities to enter the workforce, as well as more employers to hire and provide internship opportunities to youth with mental health disabilities and juvenile justice system involvement. The work group suggested that increased funding for vocational rehabilitation, job coaches, and job training programs would encourage employers to mentor, train, and hire these youth. Consider

the development of a business “Advisory Group” that could work with the Task Force to identify strategies for encouraging employers, unions, etc. to hire youth with mental health disabilities and / or juvenile justice involvement.

❖ **Address HCFA regulations that prevent youth with mental health disabilities from receiving services while in the juvenile justice system.**

*Short-term activities:* The Subcommittee could take a leadership role in exploring the feasibility and implications of altering Medicaid regulations in order to provide services to youth with mental health disabilities in the juvenile justice system. The Subcommittee might convene a more focused policy discussion on this issue, including representatives from HCFA, juvenile justice, and mental health, as well as health economists, state policy makers, and youth and families.

*Long-term activities:* Work with HCFA and other relevant agencies to address the regulatory barriers preventing youth in the juvenile justice system from receiving mental health services.

❖ **Strengthen monitoring and enforcement of IDEA and Section 504 as they pertain to youth in the juvenile justice system.**

*Short-term activities:* Working through the Subcommittee, convene an interagency meeting on enforcement and monitoring of IDEA and Section 504 for youth with mental health disabilities in the juvenile justice system.

*Long-term activities:* Develop an interagency action plan to ensure that youth with mental health disabilities in the juvenile justice system are obtaining the special education and transition services to which they are entitled. The action plan might include providing technical assistance and training to juvenile justice practitioners on IDEA and Section 504, developing resource materials (e.g. guides and tool kits for ensuring compliance), implementing a data collection system that would measure the degree to which juvenile justice systems are complying with IDEA and Section 504, and disseminating materials to youth and parents regarding their rights under IDEA and Section 504.

❖ **Consider the development of a new Federal entitlement (like IDEA) that would ensure access to education, services and supports, and job training opportunities by youth with disabilities in the juvenile justice system.**

*Short-term activities:* The Subcommittee could take a leadership role in exploring the structure, feasibility, and implementation of a new entitlement directed towards youth with disabilities in the juvenile justice system.

*Long-term activities:* Work with the Subcommittee’s member agencies and with Congress to draft and pass legislation that would ensure access to education, services, and job training opportunities among youth with disabilities in the juvenile justice system.

## Introduction

The employment needs of a vulnerable population of youth—those with mental health problems caught in the juvenile justice system—have not been addressed adequately to date. In recognition of this disparity, the Presidential Task Force on Employment of Adults with Disabilities supported the National Mental Health Association in convening a group of key stakeholders at a 1½-day conference to develop recommendations. The recommendations will be disseminated to diverse audiences from child-serving organizations to business leaders and corporations with the aim of improving transitional services for these youth.

The purpose of this conference was to draw upon the expertise of stakeholders with diverse backgrounds (including special education, law, juvenile justice, vocational training, and mental health, as well as advocates, youth, parents, and the business community), to build upon what we are learning from current employment programs for juvenile offenders and youth with disabilities, and to develop a consensus regarding policy and program strategies that will enable us to better meet the needs of this group of vulnerable young people.

The topics discussed at the conference include: the prevalence of mental health disability in the juvenile justice system, access to employment and vocational training, exemplary programs and the experience of family members and youth involved in these programs, policy initiatives needed to support these programs, interagency collaboration on the Federal and state level, special education as it relates to justice-involved youth, and other relevant issues.

There were fifty-five participants, including representatives with expertise in special education, disability, juvenile justice, mental health, policy, employment, and advocacy in attendance at this 1 ½ - day “working meeting.” Activities included several individual presentations, a panel focusing on barriers and challenges, presentations featuring several promising employment programs, and substantial facilitated discussion. In addition to this report, NMHA will produce a “Guide for Advocates” based on the results of the meeting.

The conference began with welcoming remarks from **Michael Faenza, President and CEO of the National Mental Health Association (NMHA)**. Faenza acknowledged members of Federal government agencies including the U.S. Department of Labor, U.S. Department of Education, U.S. Department of Justice, U.S. Department of Health and Human Services, and staff from the Presidential Task Force on Employment of Adults with Disabilities who were in attendance. He also thanked other participants from interest groups and advocacy organizations concerned with policy, juvenile justice, mental health, special education, employment, and disability.

Faenza made brief remarks and provided an overview of the National Mental Health Association’s history and mission. For over 90 years, NMHA has been dedicated to

promoting mental health, preventing mental disorders and achieving victory over mental illnesses through advocacy, education, research and service with its network of 340 affiliates throughout the country. NMHA's Justice for Juveniles Program is a public education, technical assistance, and advocacy effort designed to address the needs of children and youth with mental health and substance abuse problems caught in the nation's juvenile justice system.

According to Faenza:

- Statistics reveal that fewer than half of children with serious emotional disturbance (SED) graduate from high school.
- On any given day, 100,000 children are incarcerated; thousands are on probation and do not receive adequate aftercare services.
- Students with learning disabilities are more likely to engage in acts of delinquency and become involved with the justice system, in comparison with their non-disabled counterparts.
- 20 percent of children with SEDs are arrested while they are in high school.
- Research indicates that between 60-75 percent of youth in the juvenile justice system have diagnosable mental health disorders and far too many youth receive inadequate treatment or get no treatment while they are incarcerated.

Because of the many challenges that youth with mental health disabilities face, they are least likely to benefit from employment / vocational programs. NMHA is invested in making improvements in transitional services for this population of youth to enable them to compete for and maintain employment.

Faenza proceeded to introduce **Rebecca Ogle, Executive Director of the Presidential Task Force on Employment of Adults with Disabilities (PTFEAD)**.

“We are appreciative and excited about the Presidential Task Force’s vision; through our combined efforts we can increase practical services for these vulnerable youth.”

--- *Michael Faenza, President and CEO, NMHA*

The Presidential Task Force on Employment of Adults with Disabilities was created in 1998 by executive order of the President of the United States of America. Secretary of the U.S. Department of Labor, Alexis Herman, chairs the Task Force, which has 18 Federal department and / or agency members including the U.S. Department of Education and U.S. Department of Health and Human Services. Four new Federal departments recently joined the PTFEAD, including the U.S. Department of Interior, U.S. Department of Agriculture, U.S. Department of Justice, and U.S. Department of Housing and Urban Development.

The mandate of the Task Force is to evaluate existing Federal programs to determine what changes, modifications, and innovations may be necessary to remove barriers to employment opportunities faced by adults and children with disabilities. Some of the areas the Task Force will review include: reasonable accommodations, inadequate access to health care, lack of consumer-driven, long-term supports and services, transportation, accessible and integrated housing, telecommunications, assistive technology, community services, child care, education, vocational rehabilitation, training services, employment retention, promotion and discrimination, on-the-job supports, and economic incentives to work.

According to Ms. Ogle, mental health has recently been a focus of the Task Force; a greater emphasis has been placed on cross-disability issues and how they relate to employment. There is a 75 percent unemployment rate among people with disabilities as compared to the general population, which is significantly lower, about four percent. Youth with mental health issues go unserved and often end up in the juvenile justice system. A challenge exists in bringing attention to youth with mental health problems, especially the segment of the population that belong to minority groups and youth that live in poverty. Often they go unrecognized until extreme situations such as Columbine occur to create a national dialogue. The prevention of events like Columbine and the prevention of the increasing rate of incarceration of youth with mental health disabilities are goals we would like to attain. Our country cannot afford to incarcerate this huge segment of our population.

A recommendation of the Task Force to establish a new office under the U.S. Department of Labor called the Office of Disability Policy Evaluation and Technical Assistance was approved by the President. The new office was designed to end the duplication of programs within the U.S. Department of Labor. Additionally, it will ensure that a heightened and permanent focus on disability is engrained in an institutional way within the U.S. Department of Labor. Some of its functions will be to evaluate best practices and ensure they are being integrated into mainstream U.S. Department of Labor programs and services throughout the country. It will also subsume the President's Committee on Employment of People with Disabilities. Another recommendation which has been adopted is the creation of the Youth to Work Initiative. Our efforts have led us to conclude that youth with mental health disabilities in the juvenile justice system is a large issue, which we have yet to fully understand. We encourage you to share any thoughts you may have that will lead to recommendations. We will have a White House Conference in July to celebrate the Tenth Anniversary of the Americans with Disabilities Act and leading up to that will be a June 2000 National Transition Summit on Young People with Disabilities during which the recommendations of this workgroup will be shared.

“We hope to create a more coordinated and aggressive national strategy and appreciate partnering with NMHA on this very important endeavor.”

--- *Rebecca Ogle, Executive Director, PTFEAD*

## **The prevalence of mental health disabilities among youth in the juvenile justice system**

**Peter Leone, Ph.D., University of Maryland, Department of Education**

### **Characteristics of youth in the juvenile justice system**

2.8 million youth under age 18 were arrested in 1997. Of this number 32 percent were under 15 years old, 26 percent were female, and a disproportional number were African American and Latino youth. Over 100,000 youth were detained or committed to public or private facilities in 1995. Public and private operations that house juveniles contain large numbers of youth referred for abuse and neglect, and many who have emotional disturbance and / or mental retardation.

Overrepresentation of African American youth is a significant problem in juvenile corrections. In seven states, the proportion of youth of color in correctional placements exceeds 75 percent. Juveniles held for violent crime index offenses account for 20 percent of all juveniles in public and private facilities. Juvenile violent offending rates are declining in contrast to public perception. The misperceptions have lead to more punitive sanctions being imposed on juveniles mandated by politicians. There is a concern about the tendency to waive juveniles into adult courts. Of the number of juveniles incarcerated in adult correctional facilities, approximately half of juveniles transferred to adult court for prosecution were involved for non-violent offenses and were committed to adult courts because of the decisions of judges or mandated through statute.

There is an increasing involvement of private ventures in corrections. There is poor academic training for youth in the justice system, and, once released, many youth have difficulty re-enrolling into public schools. Public schools exclude these youth and transition services between juvenile justice facilities and schools is non-existent in many jurisdictions. The prevalence of disabling conditions such as mental retardation, learning disabilities, and emotional disturbances among youths in juvenile corrections is three to five times the rate of these conditions in the public schools. Many youth that were served in the mental health and special education systems in their communities are not getting served in juvenile corrections settings, despite their previous history of receiving services.

There is a strong correlation between special education youth and justice involvement. For example, over 80 percent of youngsters receiving special education services in public schools ended up in the Connecticut Juvenile Justice System.

A large number of youth in the juvenile justice system have serious mental health problems. Psycho-social and environmental risk factors also contribute to juvenile offending. It is often difficult to determine which mental illness or risk factors is a greater source of problem because juvenile offenders have multiple mental illnesses and are exposed to multiple risk factors and frequently, mental illness and substance abuse co-occur among youthful offenders.

An estimated 70-90 percent of youth suffer from mental illness, much higher than the estimated 10-20 percent for the non-delinquent juvenile population. Among the most common diagnoses in juvenile offenders include conduct disorder; oppositional defiant; alcohol dependence; major depression; ADHD; bipolar disorder; and posttraumatic stress disorder. Substance abuse exacerbates these problems and puts adolescents at greater risk for violence and recidivism. The lack of appropriate treatment can lead to further delinquency, adult criminality, and adult mental illness.

**In too many cases, the juvenile justice system contributes to the problems that youth experience while incarcerated.** Inadequate representation in court, limited diversionary programs available to courts, overcrowded facilities, inadequate educational / vocational and employment training, minority overrepresentation, the prevalence of youth with mental health problems and inadequate mental health treatment services overwhelm our nation's juvenile justice system. Programs intended for youth often promote the interests of those other than the youth they are meant to serve. Non-relevant skills are being taught to youth and in many cases are not applicable or transferable to the existing job market, thus lowering employment prospects for these youth. Often there is no expert instructor to train youth. The inadequacy of transition services reaches beyond the corrections setting because of poor links between vocational programming and the employment needs of the community. This keeps youth with mental health problems that return to the community unemployed.

A clear example of when the system is part of the problem is Arizona, where juvenile court judges control spending on placement services. All the appropriated funding was spent before the end of the fiscal year and as a result no placement options besides detention centers were available. Subsequently, less serious offenders were housed with more serious offenders due to the lack of placement options.

Individuals in the community who are illiterate or who don't have secondary education and / or vocational skills are more likely to be unemployed, on public assistance, or incarcerated as adults. Juveniles who are released without having any of their educational needs met while incarcerated are more likely to be rearrested and recommitted to juvenile corrections facilities. Youngsters leaving correctional facilities are no more well prepared to assume meaningful roles in the community than when they first entered those facilities.

**Researchers and analysts who look at youth with multiple behavioral problems and treatment needs across disciplines argue there is no "one size fits all" response to serve all youngsters.** Early intervention is essential in trying to address co-occurring mental health and substance abuse disorders in justice-involved youth. Although beyond the scope of this meeting, prevention is critical. Public schools need to assume a larger role in implementing preventive interventions to curb delinquent behavior in youth. Education of these youth must be taken seriously, but turf battles between custody and education staff interfere.

An example of a successful approach for youth in short-term custody is vocational "sampling." At the Oak Hill facility in Washington DC, youth in a computer maintenance and repair program served as mentors to a middle school computer club, providing an example of real world work options. Rigorous vocational programs are needed for youth

to be able to compete, yet too often vocational training is isolated from the community job market.

**Common elements of successful community-based programs (alternatives to juvenile corrections) include intensive individualized attention, community-wide, multi-agency and collaborative approaches.** For juvenile correctional facilities, education and training should be institutional priorities. Qualified staff, providing rigorous and relevant academic training in corrections should be paid comparably in order to rehabilitate youth. Prevention and wraparound services cost much less to implement than institution-based services.

Several states have developed collaborative initiatives. Virginia cities like Lynchburg and Norfolk are implementing the Comprehensive Services Act using pooled funding. Reclaim in Ohio will develop local, community-based options to incarceration. We must ensure that youth of color don't receive a more punitive response from the juvenile justice system, and we need to help agencies identify appropriate responses to ensure better outcomes for youth. By monitoring and evaluating our efforts, accountability is ensured.

## **Discussion**

- The system has failed to reliably identify disabilities in youth. Sweeping systems changes based on Federal legislation (similar to IDEA) are needed because the overwhelming majority of youth do not get served. We need to create an entitlement. States that are doing better are those who filed class action litigation.
- Education of judges about these issues has grown, although the public has negative perceptions regarding youth with mental health disabilities. Congress must get involved by developing incentives and disincentives, perhaps through core guidelines similar to the Office of Juvenile Justice and Delinquency Prevention (OJJDP) block grant core requirements. We also need more enforcement of the ADA and IDEA. Unfortunately, the core requirements of juvenile justice are being undermined, and the current conservative political climate is unlikely to accept mental health core requirements.
- Strategies other than Federal mandates would be preferable, such as identifying exemplary legislation and programs, such as Reclaim Ohio, Kansas's statutory framework, and the Virginia Comprehensive Services Act.
- Identification of best practices is needed for new policy to be created or changed on the Federal level. Regardless of the political climate, if the interest groups gathered here agree on Federal agenda, we need to engage in a dialogue that represents our various interests.
- Youth with mental health problems are not committing crimes at higher rates, but they are pulled deeper into the system and stay longer. There are good diversion models in Farmington, UT; Waco, TX; Portland, OR; and Seattle, WA.

- Many facilities don't want to provide medications, although inappropriate medicating causes behavioral problems. Medication is a training issue. One solution is to get medical schools to do residential rotations in juvenile justice systems once a week to monitor medications and provide training to justice personnel.

### **Description of employment and training needs and challenges among youth in the juvenile justice system**

#### **David Brown, National Youth Employment Coalition**

The National Youth Employment Coalition is an organization with 150 members representing local youth employment programs, national and research organizations. The project we are currently undertaking was funded by the Annie E. Casey Foundation and is a joint effort of the National Youth Employment Coalition, Justice Policy Institute, and the Youth Development Research Fund.

This project is building upon efforts initiated by the Home Builder's Institute (HBI) between 1996-1998. HBI convened a Task Force on Employment and Training for Court Involved Youth sponsored by the U.S. Department of Labor in collaboration with the U.S. Department of Justice's Office of Juvenile Justice and Delinquency Prevention to address issues related to the employment needs of justice-involved youth. A report was generated by the task force with findings / recommendations that paralleled the recommendations that Dr. Leone discussed earlier. The report is geared towards practitioners, policy makers, workforce development community, juvenile justice corrections officials, and juvenile judges. The National Youth Employment Coalition's role in the development of the report was to identify policy initiatives across the country that were enabling supportive employment programs for young offenders. A final version of the report has not yet been released for dissemination.

The task force was charged to find the reasons for and address the unwillingness of the juvenile justice system to implement employment programs for at risk youth. Through a survey of the field, the task force's objective was to identify policy and program initiatives around the country that target the juvenile offender population and serve the workforce and developmental needs of these youth.

The subjects who were the focus of the study were the general youth corrections population, except for status offenders. The survey had not particularly focused on youth with mental health disabilities but had discovered that many programs did indeed serve this segment of youth.

The main theme that came out of the work of the task force was the real disconnect that exists between the workforce development community and the juvenile justice system, presenting the challenge of how to forge better linkages between the two.

Our three organizations have continued to work together on this issue. Despite efforts on the national level, on the local level these two systems are still very disconnected. One

issue for juvenile justice youth is that they cannot access programs within the job training system. We believe this has to do with high performance standards and concern that these youth will not do well in these programs. A comment that I received from a probation director validated this sentiment that local employment officials are not willing to collaborate with juvenile justice, even after assistance and resources to implement services are offered.

Recommendations include:

- Need for incentives to be created to increase involvement of juvenile justice youth in employment programs. There is no enforcing body that monitors the Workforce Investment Act and subsequently these youth are left out of programs.
- Identify promising programs and best practices from the field, which are replicable, and
- Highlight those programs that make an effort to develop relationships with other systems.

### **John Savage, Center on Juvenile and Criminal Justice**

In 1825, the Society for Prevention of Juvenile Delinquency started to separate juveniles from adults and began to recognize the difference between the needs of adults and those of juveniles. Statutory changes in 1970's-80's began a change in the trend of the juvenile court when certain offenses automatically required that children be tried as adults and punitive language and juvenile graduated sanctions were added. The 1990's have been the worst decade to the detriment of youth in the juvenile justice system:

- On any given day 10,000 juveniles are incarcerated in adult jail.
- Currently, there are 47 states that have enacted more punitive laws, transferring children to the adult system, and eliminating confidentiality protections.
- Minority overrepresentation is a serious issue.
- The next wave of youth will be released from adult jails and re-enter the community with a serious lack of aftercare and transition services.

Currently, balanced and restorative justice models dictate the structure of the justice system. Accountability, public safety, and competency development are the core principles which many states follow and, as a result, spending on other developmental programs falls by the way side and do not equal the spending on accountability programs. No juvenile justice administrator gets fired for a failed school curriculum or for 100 percent recidivism rates.

This is a political will issue, and advocates need to strategize differently in the absence of support on the Federal level. Strong community-based, interagency, grassroots organizing can work to impact legislation. For example, in Maryland, the advocacy coalition in the state reacted to a series of atrocities that occurred in a bootcamp facility and were successful in getting buy-in from persons running for public office to shut down the facility. We need to promote coalition building in order to impact policy change.

“The last people you in the world you want doing that [providing mental health services] are juvenile justice administrators. It’s not their job to do it.”

--- *John Savage, Center on Juvenile and Criminal Justice*

Since 1993, there has been a 56 percent decrease in juvenile homicides, yet 2/3 of Americans believe juvenile crime is on the increase. A discrepancy exists between the real statistics on youth and what the public believes, and this is a quandary we need to address. Some work that we've done on how the public perceives these issues also indicates that the public is strongly behind the idea of not giving up on kids and they believe in the rehabilitation ethic. There is political capital to be gained by understanding the reality of how people perceive this issue.

The research on workforce development and juvenile justice youth is not good; there is not a lot research that shows employment programs are beneficial to youth. A U.S. Department of Labor study found that employment programs without additional services do not help youth effectively. We cannot view employment development in isolation from other needs. There must be service integration.

### **Edward DeJesus, Youth Development and Research Fund**

Mr. DeJesus' core responsibility as a member of this team is doing site visits and meeting with program and institution directors and the young people involved in Promising and Effective Practices Network programs, an initiative of the National Youth Employment Coalition. PEPNet identifies and disseminates information on effective youth employment and training programs including some that serve youth in the justice system.

#### **Purpose and goals**

To inform juvenile justice practitioners and policy makers that strong-evidenced based programs exist for youth. The success of these programs increases long term economic opportunity of young people and prevents recidivism.

To identify organizations that demonstrate promising, effective practices in serving offenders and identify principles and strategies used in these programs. There is a dearth of information on youth employment programs. Through informal networks and peer-to-peer learning we were able to identify programs that serve youth effectively. We collected this information to use in the report and will make it accessible to practitioners.

#### **Background**

Earlier reform in the U.S. Department of Labor impacted the availability of employment programs. With an 80 percent cut in funds for programs for out-of-school youth, state capacity for youth employment programs was lost. Despite the new Workforce Investment Act, there is still a lack of knowledge on what works.

The four core criteria that PEPNet-approved programs require are purpose and activity, organization and management, workforce and youth development, and evidence of

success. A wide range of programs have been identified that serve the different levels of the delinquency system, including diversion, detention, adjudication, institution-based, and aftercare programs. Site visits and extensive interviews were conducted with site directors, program managers, key staff, and young people.

The following principles emerged as characteristics of effective employment programs for justice-involved youth:

- Commitment to rehabilitation: Balancing security and discipline while empowering young people to succeed. Provide young people with access to a correctional behavioral system that emphasizes rewards and incentives over punishments, and create a normalized environment. High standards and daily self-assessments work to reinforce workplace skills in youth. Youth help to create and shape the initiative as well as their own individualized treatment plans.
- Continuum of care: Servicing youth throughout and beyond the juvenile justice continuum. Includes thorough assessment, clear intervention strategies, and good follow up because delinquent youth have a variety of needs that go beyond “quick fix” remedies. Continue to reinforce beliefs and behaviors once youth are no longer supported by structured environment. Provide viable options on the streets and a vision for the future. Post-placement centers such as GED assistance and transitional services must reach out to urban youth population and learning how to use youth popular culture to promote educational / workforce achievement for youth.
- Individualized education programs: Initiate dialogue with participants and provide strong supervision and support, to create individualized learning plans.
- Integrated education: Are we creating a two-tiered educational system? The same standards are not applied for youth in non-traditional school settings and we need to assure that we have the same resources to meet the standards of quality education for youth in corrections settings.
- Collaboration: With community organizations that provide aftercare services. This approach balances innovative skill building while promoting community safety. Community-based organizations should receive incentives for working with and promoting these youth.
- Support Structure: Counseling, psychological services, and mentoring programming. Mentors increase youths’ educational levels.
- Accountability: Through standards and tracking improvement measures as well as recidivism rates.

“ Instead of just doing job training, let’s train them how to stay alive and free, first and foremost, and once we accomplish that [finding] a job will be no problem.”

--- *Edward DeJesus, Youth Development and Research Fund*

Exemplary programs:

- Provide continuity from the structured environment into communities.
- Stress skill building and “the attitude problem.”
- Delancey Street Community Assessment and Referral Center acts as a centralized body of services for juvenile offenders, coordinated through a multidisciplinary team that includes psychologists.
- Project Rio-Y provides high-level mentoring that stresses accountability, follows standards, and tracks recidivism rates through a database.

**David Brown, National Youth Employment Coalition**

Some of the major findings of the report include the importance of collaboration across public agencies, willingness to be flexible in the design of systemic efforts, common promotion of the youth development approach, creativity around new and innovative programming, ability to redefine service delivery, and the ability to locate a variety of funding sources (for example, tapping into the Workforce Investment Act and other systems for funding).

RIO-Y is an example of excellence in collaboration through integrated services. The Ohio Department of Human Services partnership with the conservation corps helps to direct youth referrals into conservation corps. The Nebraska Juvenile Justice Agency and Department of Vocational Rehabilitation partnership is an example of collocation. In California, local probation has tapped into TANF funds to support probation services to offenders.

Workforce Investment Act funds should be tapped into by the juvenile justice system. This is an opportunity for the juvenile justice systems to become more involved in employment.

The Workforce Investment Act supports local youth councils, which could be engaged by juvenile justice systems interested in integrating services. Youth opportunity grants to 36 communities, focusing on out-of-school youth, could be another opportunity for collaboration.

## Discussion

Q: A challenge for the President's Task Force is how to strengthen the generic Workforce Investment systems and increase their capacity to recognize youth with disabilities in these programs? How will these programs serve youth with special needs? Do we talk about reasonable accommodations and self-determination? Do we have qualified staff to do assessment and programming? Can we develop strategies on how to bridge these worlds?

Brown: It's been a struggle just building a partnership between the workforce world and the juvenile justice world. The workforce and juvenile justice worlds are not yet bridged. This initiative (employment needs of youth with mental health disabilities) will assist in the outreach effort and assist in bridging the three worlds of workforce, juvenile justice, and disability / mental health.

Comment: We should try to create a legislative strategy requiring that agencies work together. The Office of Juvenile Justice and Delinquency Prevention has worked with the Center for Mental Health Services' 43 sites serving youth. OJJDP needs to expand their work with the U.S. Department of Labor to promote linkages at the state and community levels.

Comment: One of the ways communities can bring the Workforce Investment Act to the forefront and ensure that new legislation is implemented and carried out at the local level is for people to get out and talk to their local officials. We need to stimulate collaborations on the local level. The National League of Cities is encouraging members to identify community-based efforts working with young people on these issues. NLC recently launched an institute on youth, education, and families and will be looking at economic self-sufficiency issues. NLC has database of exemplary programs that could be a resource to this effort.

### **The implications of disability law for the training and employment of youth with disabilities in the juvenile justice system**

**Joseph Tulman, University of the District of Columbia, David A. Clarke School of Law**

The Individuals with Disabilities Education Act (IDEA) potentially opens up opportunities for the young people we are discussing here today. A National Council on Disabilities Report states that post-secondary and employment opportunities are opening up for increasing numbers of young adults with disabilities as they leave high school. Post-school employment rates for youth served under Part B (of the IDEA) are twice that of older adults with disabilities who did not benefit from IDEA in school, and self-reports indicate that the percentage of college freshman with a disability has almost tripled since 1978.

The negative reality is that 88 percent of states in a study of compliance with the IDEA (n = 44) have failed to ensure compliance with the Individuals with Disabilities Education Act's secondary transition services provisions, which require schools to promote the appropriate transition of students with disabilities to work or post-secondary education. Is anyone familiar with the six states that were complying with transition services? Does any one know of any state where there is compliance regarding transition services for children in the delinquency system?

#### **Facts About Disability Law for Children in the Delinquency System.**

- A child who is eligible for special education services is entitled to transition services from the age of fourteen and above.
- Most special education services are not available in juvenile delinquency and incarceration facilities; as a matter of law, however, those services must be available.
- A parent of a child with disabilities (or suspected disabilities) can obtain – upon request from public school personnel, without charge to the parent – evaluations in any area of suspected disability.
- A parent of a child with disabilities (or suspected disabilities) can obtain – upon request from public school personnel, without charge to the parent – a vocational assessment and evaluation for the child. (Half true, depending upon the age of the child.)

Children with disabilities and their families are often the least prepared to advocate for their rights in the juvenile justice, immigration and naturalization, and child welfare systems when egregious violations occur. Children with disabilities and their families who are non-English speaking, or who live in low-income, ethnic or racial minority, and rural communities, are frequently not represented as players in the process.

Basic rights for youth under the IDEA include:

- Free Appropriate Public Education (FAPE). Special education and related services that have been provided at public expense, under public supervision and direction, and without charge; meet the standards of the State educational agency; include an appropriate preschool, elementary, or secondary school education in the State involved; and are provided in conformity with the individualized education program required under section 1414(d) of this title.
- Related services are transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services,

except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children.

- Transition services. What is it going to take to help youth become independent? What is it going to take to get young adults from school to work, to live independently, into post-secondary training or education? Transition services are a coordinated set of activities for a student, designed within an outcome-oriented process, which promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation. The coordinated set of activities shall be based upon the individual student's needs, taking into account the student's preferences and interests, and shall include instruction, community experiences, the development of employment and other post-school adult living objectives, and, when appropriate, acquisition of daily living skills and functional vocational evaluation. Mental health services are not included among transition services.

**“Traditionally the court discussion is problem-focused and does not talk about how children will navigate the gulf between dependency and independence and how to become competent.”**

--- *Joe Tulman,*  
*University of the District of Columbia David A. Clarke School of Law*

The most confounding thing about the delinquency system is that the focus tends to be on the youth's deficits. None of the dialogue in the court focuses on the strengths of the child and how a child can navigate the great divide between dependency and independence. What is appealing about the IDEA is the focus is supposed to be achieving something for the youth that will benefit him / her and assist with the transition period from childhood into adult life. Additionally, there can be a multi-disciplinary team working on behalf of the youth that helps develop a plan for the child and the parent under IDEA, using a mediation model rather than the adversarial court system that brings out the worst in youth. For a young adult who has been abused, neglected and abandoned and diagnosed with a disorder, the latter is not an effective approach.

Under the IDEA model, problem solving is applied and the youth is integrated in the decision making process. Under IDEA, there is flexibility for the multi-disciplinary team in creating a plan for youth, and service can be adjusted if they are not appropriately addressing the child's needs.

Mr. Tulman asked the group to generate an ideal list of services that they would put in place for a hypothetical youth with mental health disabilities and involvement with the juvenile delinquency system.

### **Ideal services for youth in the juvenile justice system.**

- Psychological testing / Comprehensive Assessment
- Speech Assessments
- Neuro / Psychological Assessments
- Career development – more than “career awareness”
- School-based social worker to coordinate services required by IDEA
- Mediation between victim and offender (as to the delinquency charge), service development, and family based conferencing
- Individual and family counseling
- Free Appropriate Public Education
- Individual tutoring
- In-home counseling
- Vocational testing
- Career development and mentoring
- Effective management of medication
- Integrated case management – to ensure service providers are meeting this needs
- Alcohol education and prevention and counseling
- Parent training (for the parent of delinquent child or a young parent in the delinquency system.)
- Nutrition / Physical Education
- Social skills and independent living skills
- Opportunity for positive peer related activities (therapeutic recreation)
- Access to primary and reproductive healthcare
- Right to evaluations of any disability

Almost everything we've listed can fit into related and transition services under IDEA. It would be ideal if all these services were required to be available in every jurisdiction in this country and must also be appropriate and provided free of charge.

- Psycho-educational test batteries (including vocational, speech language, clinical, neuro-psychological) are permitted for diagnostic purposes.
- Individual and family counseling are included as related services.
- Victim-offender mediation may be covered as a transition service if it represents a way for the youth to develop life skills and become more socially competent.
- Mentoring is part of transition services, including “job coaches.”

Coordination with school districts is covered under continuing services in provision known as “Child Find.” That means there is an affirmative obligation on part of the school system to identify and serve these kids, including teens who are no longer in school and who have not been previously identified, if school officials believe there is a disability. It's the school's responsibility to do a diagnostic work up. If the delinquency system is the custodian of the youth and are not “Child Finding,” that can be considered child neglect. In most states it's a misdemeanor for certain government officials not to report child neglect. In effect, officials are not only neglecting the child, they are

committing misdemeanors by not reporting this neglect. Where are the IDEA police when you need them?

The point here is that there already is a Federal law that covers virtually every service on our wish list for kids in the delinquency system.

## **Discussion**

**Q:** What is the incentive for attorneys to litigate ADA cases?

Tulman: There is incredible potential here because attorneys who successfully litigate IDEA cases are entitled to market-rate fees. If you can get market rate attorney's fees when you prevail, I guarantee that when you have almost 100 percent of youth in the delinquency system who have disability issues, it is almost impossible not to prevail.

**Q:** What about the educational advocate? Is there any provision for that? Can one be paid for out of public funds if you are eligible?

Tulman: This brings up many possibilities to enforce your rights in terms of advocacy, either informally through mediation or through an administrative hearing (due process hearing). In most states, you do not have to be a lawyer to represent a child or a parent with IDEA issues at an administrative hearing. A lawyer is much more effective if he / she involves an expert witness (education advocate) in an IDEA case. In some instances, judges have appointed educational advocates who are not attorneys and don't know IDEA. There should be an expert to look at the school to see if they are providing adequate special education services. You have a right to an independent evaluation if you're not happy with the evaluation of the school system.

**Q:** How is that different from a court-appointed special advocate (CASA)?

Tulman: CASAs are related to child welfare and neglect system and tend to be responsible only for representing those youth.

**Q:** What is the time period when you are advocating for an assessment of a youth?

Tulman: This differs from locality to locality but the Federal statute requires that it be done in a reasonable amount of time. In DC, under Federal court order within 15 calendar days. In most jurisdictions it can be 90-120 days. If I can get a request for evaluation at point of arrest, we will be in good shape for disposition. Good representation extends over 5 years. Public defender caseloads per year are anywhere from 300-500 youth. Public defenders have to investigate, write motions, and prepare litigations for each case in a day or less. No wonder that there is a 90+ percent plea-bargaining rate and malpractice in so many cases.

It is important to chart out the youth's educational history patterns beginning from kindergarten or earlier and violations of IDEA. In many cases, the "bottom falls out" educationally between grades K-3 and never gets put back in. Truancy starts in school

sometime between 6-8<sup>th</sup> grade. Drug use begins in 7-9<sup>th</sup> grade. Mild delinquency in grade 6-8<sup>th</sup>. In charting a case, examine chronology (grades, standardized scores, reported conduct, attendance, failures, repeats, disciplinary actions, and parent/school contact). Legal rights that may be violated include Child Find, evaluation, re-evaluation, and FAPE.

### **Potential Remedies:**

#### **Compensatory Education**

One case-based remedy, if the school system is not complying with law, is compensatory education, which will make the education system educate a youth it did not serve. In the Supreme Court case, *Burlington v Massachusetts*, Justice Rehnquist wrote that if the school system doesn't provide the special education that is needed parents can go out and get the service privately and force the school system to pay for it.

#### **Americans with Disabilities Act**

Section 504 (1973) under Title II of ADA applies to all state and local governments including justice systems, and courts. Given the Supreme Court's *Olmstead* decision, we will see in the future wholesale litigation against courts and school systems based on the ADA because of their failure to recognize disabilities. There are limitations to the use of the ADA, however, including congressional efforts to limit activism by lawyers, and limits on class action work.

#### **Organizing Opportunities**

Practitioners have to take the school system into due process administration hearings and demand educational services. If you can organize enough attorneys who have caseloads of 300-500 and get market rate fees and services for their clients you have an organizing opportunity. IDEA has created a structural dilemma, because it is impossible to pay for all the individualized services children are entitled to. The only way all children can get services is through fund pooling between delinquency system and other child serving systems. My recommendation is to not just consider class action lawsuits, but to also look at class action cases in combination with grassroots organizing around individual cases (a case aggregation approach). Organize from the ground up and advocate to receive training for attorneys, local judges, and corrections staff.

Q: The majority of delinquency cases end up in small counties. There is a shortage of lawyers in rural areas and at times lawyers can't specialize because of lack of training.

Tulman: We need to get more lawyers willing to work in the area and also receive training.

Q: Especially for poor families, it seems impossible to get appropriate services for youth with disabilities entering the juvenile justice system. What can be done for youth who are entering the adult system who may be losing their rights and have an unidentified disability?

Tulman: If past sentencing, the youth can not ask for evaluation services. The school system would be violating the Child Find obligation, however, and so would other

systems with which the youth came into contact. The court has to commission a youth study (pre-trial), and governmental entities cannot blur the law when they are examining what a youth's needs are and what opportunities that youth has.

Q: The one-youth-at-a-time, individualized case approach won't solve the problem. We need to begin to develop institutional ways of resolving these issues and not just rely on lawyers. You don't begin to change the environment this way alone.

Tulman: I believe you can change things through bottom-up pressure. By training attorneys in DC, we backlogged the school system with over 900 hearing requests. They were not providing services to any kids, pressure was building, and this forced a decision. We need grassroots action, systemic education, and organizing. We cannot only do class action in isolation; there is a need for case aggregation.

### **Panel presentation: Perspectives on needs and barriers**

#### **The Honorable Gerald Rouse, National Council of Juvenile and Family Court Judges**

The National Council of Juvenile Family Court Judges (NCJFCJ) is the only judicial membership organization in existence and was founded in 1937. The NCJFCJ has 13 judicial voting members representing 16,000 juvenile and family court judges and other another 1,300 non-voting members, including probation officers, social workers, educators, and others.

Judges with multiple jurisdictions and short rotations through juvenile court cannot become specialized in all aspects of the law in that area, such as special education law. This can create a problem in the juvenile justice system which we need to overcome. There is a growing interest in mental health issues among the judiciary. Mentally ill youth, children with other disabilities, and youth of color are at the greatest danger of penetrating the juvenile justice system. NCJFCJ's focus for the year will be to address the issue of overrepresentation of youth of color and children with disabilities in the juvenile justice system. On April 9-12, 2000, NCJFCJ will hold a conference on ADHD, and our hope is to build on that effort and continue cooperation between the judiciary and those in the mental health field.

From the perspective of a judge, the major barriers to helping youth with mental health disabilities in the juvenile justice system include:

- Obtaining accurate evaluations is a challenge. Judicial training on mental health issues needs to give special attention to evaluations because differing diagnoses across psychologists make it difficult for judges to know what services to order. The biggest barrier is getting an accurate diagnosis of a youth's needs.
- There is a need for a "best practices" manual for working with delinquent kids, similar to NCJFCJ's comprehensive work in the dependency area. The best practices

manual would discuss how judges can work with families and also focus on the issue of children with mental health problems and their support system issues.

- There is a need for foster parents to work with special needs children, through programs similar to Boys Town.
- There is a plain lack of resources in the juvenile justice system and children tend not to be a priority on politicians' agendas. When children become the focus, legislative action is more apt to occur.

### **Phyllis Eisen, National Association of Manufacturers, Center for Workforce Success**

The Center for Workforce Success is the education arm of the National Association of Manufacturers (NAM). NAM is a lobbying organization that has 14,000 member companies and represents 18 million people within the economic sector. There are 250,000 individual manufacturing firms that are affiliates of NAM. Although manufacturers are a small part of the actual working population (only 16 percent), they supply 32 percent of the gross domestic product and are driving the economy, particularly in the high-tech area.

**“I believe we can bridge the [workforce] gap with untraditional populations such as youth with disabilities in the juvenile justice system.”**

*--- Phyllis Eisen, National Association of Manufacturers*

Thanks to a tight labor market, there has been a greater focus on developing workers. A skilled workforce gives us a competitive edge as a country. The current workforce population is a new generation of people who have to adapt to changes in technology, the global economy, and demography. With high demands for more people to join the manufacturing workforce, the business community is embracing workforce development because it's the most profitable thing to do.

Challenges for employers:

- The greatest obstacle is the acquisition of skills. The demands of an entry-level employee are high and he / she will need to have problem solving skills, do critical thinking, be able to communicate, work in a team, and use basic technology. This presents great challenges for youth with disabilities. How do you develop job skills for these youth? The solution is to create a dialogue between manufacturers and the systems serving youth on the local level.
- Manufacturing is not appealing to kids and parents today, and there is a lack of interest in careers in manufacturing because of the impression that they are “dead end” jobs. Federal Reserve Chairman Alan Greenspan said that we have no choice but to train and develop skills in everyone in the country or we will have to solve our labor problems with immigrant workers or move manufacturers outside our country. NAM has been working with school-to-career programs, working with K-12, and

with community colleges to promote manufacturing as a possible career avenue. I am optimistic, and believe that we can bridge the workforce gap with untraditional populations such as youth with disabilities in the juvenile justice system, although this is not going to be easy.

## **Discussion**

Q: Is NAM involved in talking to members of Congress who tend to view juvenile delinquents as undeserving of the education and training that would make them eligible for the kinds of jobs you were talking about? Is NAM weighing in to say that this is not an issue of an undeserved privilege, but of necessity, and that justice-involved kids can help the economy?

Eisen: Yes, we have a strong lobbying arm, but many corporations do need to be pushed to see the relevancy of this population as potential employees. Their awareness needs to be raised. I would not look to the business community to advocate for these youth yet because there is not widespread acknowledgement of the relevance of this issue.

Q: You mentioned local-level work. Do you see your members as potential training sites?

Eisen: Employers want skills already there, and mostly they want a reliable employee who will work full days, have transportation, etc. There are 1,650 corporate universities, through which the business community has taken the initiative to train future employees, but we need to support community-based organizations like YMCA's to help many of our young people get prepared for the next step.

Q: We now have the support of manufacturers and employers on the local level, but it took our agency going to employers' groups and getting them on our board and letting them see who the youth are. Now they are lobbying with us.

Eisen: It takes a lot of work on the ground level to get political advocacy going. I can't stress enough the dialogue that has to happen with individual employers at the community level.

### **Lili Garfinkel, PACER Center**

The PACER Center is a parent-training center in Minneapolis, and through the Alliance project we do advocacy work with parent centers throughout the country. We are special education advocates who try to develop fair and mediated responses to youth with special education needs. PACER provides training on special education law and workshops for justice system professionals and justice involved youth and their families. In 1994, I started a project on juvenile justice and youth with disabilities, the first of its kind. We are encouraged that people are looking at youth with disabilities in the justice system and their needs as a serious issue.

PACER is also a part of the National Center on Education Disability and Juvenile Justice (discussed earlier by Peter Leone) that works to address the needs of youth with disabilities in a very practical and scientific way by looking at research and best practices that serve these individuals. PACER has developed a publication entitled Special Education Rights, Unique Challenges Hopeful Responses, which is a resource manual for professionals and parents. We also have video available on how to work with families.

From an advocacy perspective, my concerns about this issue include:

- Family inclusion. We always advocate working with families, to engage them, because they are part of the solution. Try to encourage families to work with other families in the same situation to build supports. How do we engage families in the process? Does the family and the school understand what the disability needs are?
- Too many children are referred to the courts for behaviors that are better addressed through special education services in the schools. We need to train special education educators and school personnel to appropriately address young people's needs. Teachers need tools such as functional assessments and behavior plans to address education and learning needs in a proactive way for kids.
- In order to end the cycle of failure, adjudicated youth need to be placed in programs in which they can succeed and which are matched to their needs. There is a need for strategies that build social skills through behavioral interventions and positive behavioral supports that work, and critical thinking skills that prepare youth to re-enter their communities.
- We have to better identify the disabilities. Conduct disorder is a description of learned behavior, and we need to look for the source of the behaviors with comprehensive testing.
- Lack of transition to aftercare services. Transition should begin the moment a child is sent to an out-of-home placement and should address the disability needs, job possibilities, and realities for youth.
- Accountability for youth and the agencies and programs that work to treat these kids. Program outcomes must be monitored.
- Restorative Justice is an excellent approach in that it provides a way for youth to compensate his/her victims through actions, deeds, and money. It involves the community and extended family in the young person's rehabilitation.
- Risk-based interventions need to be examined. After looking at the list of risk factors in a youth's life, a plan should be developed which identifies and develops strengths and addresses risk factors by providing family in-home therapy or family supports, for example.

“When these kids come out we want them to be in a place where they are skilled and able to take their place in society again. We don't want them to be headed for more and more difficulties, it will just aggregate. Frustration and anger and lack of abilities that confound kids will not be addressed through punishment alone. It will not teach them accountability and not teach them not to re-offend.”

--- Lili Garfinkel, PACER Center

### **Kurt Bumby, Clinical Director, Missouri Division of Youth Services**

The Missouri Division of Youth services, under the Department of Social Services is responsible for providing a balanced approach to public safety and the treatment and rehabilitation of juvenile delinquents committed by the courts. There are 1,600 juveniles in residential and non-residential services in 5 regions throughout the state. Given the importance of this issue, it is concerning that I am the only state juvenile justice administrator present.

I've spent time talking to individuals in the agency about concerns and issues they have regarding employment of youth with disabilities in the justice system.

Youth, treatment staff, and management identified the following challenges:

- Society's ignorance and discriminatory practices continue to vilify youth. This discrimination prevents youth from acquiring jobs and gaining acceptance in schools and their communities and is a particularly difficult issue for sex offenders.
- We need to have effective benchmarks that reflect realistic and attainable goals for kids in the justice system with mental health and other disabilities.
- Although there is a focus on treatment on rehabilitation in Missouri's juvenile justice system, with an emphasis on vocational programs, there are still some challenges within and outside of the system. For example, there are bureaucratic obstacles related to employment programs for juvenile offenders in the community, which too often are great opportunities that youth can not access.
- Staff development issues can be a challenge as well. It is important, but difficult, to have well trained staff that understand the mental health needs of these youth.
- Some local Job Corps program have the expectation that, before acceptance, a youth must be 6 months post-release from facilities. This restriction is clearly an obstacle and barrier, particularly for those youth exiting residential programs and reintegrating into the community.
- These youth need treatment. For example, social skills, communication and problem-solving skills, conflict resolution, emotional management, coping skills, and conflict resolution skills training are needed in order to meet the demands of the workplace environment and other stressors.

Recommendations from a juvenile justice perspective include:

- Adopt a rehabilitative approach. Missouri is investing in diversion programs ranging from restitution and restorative justice to the establishment of alternative schools as well as a continuum of services from small community based non-residential facilities to small moderate and secure care residential facilities with the intent to enhance skills, prevent recidivism, and improve youth functioning. Division of Youth Services is hiring more specialized staff to teach special education and vocational education, and each of the programs provides a minimum of 5 credit hours of job skills training. In addition, educational and clinical psychologists, family specialists, and substance abuse counselors are being recruited to work with kids in the justice system to conduct assessments and evaluations.

- Work in collaboration with a university. We are collaborating with the University of Missouri to provide testing for and training on mental health issues and special education. We also have a strong relationship with the medical school through which psychiatry residents provide medication management services and psychiatric evaluation. We have established internship programs with counseling psychology departments and teachers in training to provide services to our facilities.
- Develop partnerships that provide job opportunities. We emphasize job retention skills for youth, and, through collaboration with the Missouri Division of Workforce Development,  $\frac{3}{4}$  of a million dollars goes into the Jobs program which makes available hundreds of job openings and “real life” job opportunities. The following are examples of organizations who participate in this effort, providing real career opportunities for youth: recycling centers, Parks and Recreation, U.S. Army Reserve, the Housing Authority, visitors centers, an animal shelter, the juvenile court, Salvation Army, Department of Public Safety, alternative schools, police departments, and museums.
- Teach skill enhancement activities. We teach youth to be self-advocates and educate them about the ADA and how it impacts their lives.

## **Discussion**

**Q:** What is the average length of stay for children in Missouri facilities?

**Bumby:** The average length of stay in residential facilities is 6-9 months. However, as youth are involved in aftercare programming, which can include the Jobs Programs, the length of time a youth remains in DYS custody can be as long as a few years.

**Q:** There are opportunities in the WIA to create more comprehensive youth development systems, and the work you are doing is a good model of this. To what extent has your agency been engaged in planning efforts for the Workforce Act in Missouri or at the local level—particularly in trying to get people on these workforce boards and youth councils on the state and local level?

**Bumby:** We have recently begun to engage in these efforts. There have been ongoing discussions between our DYS representative (Kit Glover) and the Division of Workforce Development, and established a contract with the Division of Workforce Development, to administer the DYS Jobs Program. DYS Staff serve on some of the local youth council throughout the state.

## **Jacki McKinney, Federation of Families for Children’s Mental Health**

The Federation of Families for Children’s Mental Health is a national mental health advocacy group that teaches and supports families to have a voice on issues that impact them. We advocate for rights to services that include Medicaid, IDEA, and the ADA. The Federation also provides other services like parent and provider training, with a focus on family-centered care. We are concerned about court-involved youth with mental health

needs and would like to promote a healing approach for these youth. Many of these youth come from a disadvantaged background and are youth of color. Culturally competent services are required in order to mend and promote healthier youth. It takes a giving environment to raise a child.

I am a grandmother and an advocate. Growing up, I was taught never to ask for help from others. I am an advocate because my children were always involved in high-risk behavior and were in and out of the justice system. I had another chance to raise children when my grandchildren came to me through previous involvement with the foster care system, and my focus in raising them was to keep open lines of communication between us. I have heart-to-heart conversations with my grandchildren and ask them, "How do you get along with other people?" and talk about how they handle relationships with others. I teach them respect, non-violence, responsibility, and how to ask for help. I share my experiences to teach them why accountability and responsibility is important. This is a day-to-day struggle but I never relent, and you are my partners in developing healthy human beings.

**"Why do they [youth] have to be arrested before they can get help?"**

*--- Jacki McKinney, FFCMH*

There is a need to better understand some of the underlying issues that influence youths' behaviors before we have knee-jerk responses to their actions. The fact is that most of these children are poor and hungry which adds to their anger. Most of all, I have a problem with the system in that youth cannot receive services or treatment until they are arrested. Wraparound services have been successful with my family. But there is still a struggle in trying to access services for many youth.

#### **Jeremy Reed, Positive Education Program graduate**

I am 19 years old, and I am a graduate of the Positive Education Program (PEP) and will share my perspective and experiences with the program.

PEP is a program for children with severe behavior handicaps or emotional and mental disabilities. I am currently employed at TRW and work in the data center. I was in sixth grade when I was first referred to a serious behavioral handicap program. I was disrespectful towards teachers, passive resistant, defiant to authorities, belligerent with my mother and stepfather, rebelled against a structured environment, and had difficulty focusing on my schoolwork. My behavior had escalated, and, by age thirteen, I was already entangled with the juvenile court system. I had a strong resentment toward my stepfather, stole, experimented with substances, and hung out with the wrong crowd. At age sixteen, I was placed on probation which turned into intensive probation with a suspended commitment to the youth detention center. Although it was difficult, I managed to stay out of jail. By the time I was a sophomore in high school, I was placed in a more restrictive facility, and this is when I started at PEP.

In the beginning, it was tough transition. The biggest challenge for me was listening to the PEP program staff. With the support of caring staff and teachers, I spent time with staff and came to understand they were real people and really cared for me. They helped me to confront and resolve problems that have been plaguing me for years. One of my teachers, Mr. Gomez, helped me. Mr. Gomez and I spent hours together, and he helped me during the difficult times. It was therapeutic, enriching, and educational for me. When I decided to acquiesce with the program, things started to turn around for me.

Through PEP, I was involved in a mime theater and practiced with nationally acclaimed artists. We performed in Cleveland playhouse, and I had the opportunity to develop my musical ability. I've been playing the piano for eleven years and was able to perform annually at PEP's show in an art gallery in downtown Cleveland. Last spring I was selected to be a student speaker with former Congressman Lewis Stokes at our center's graduation ceremony.

I was also enrolled PEP's Transition from School-to-Work program and learned job and vocational skills in the community. At first, it was difficult for me to maintain a job. I believe that it is the school's responsibility to help students get jobs and keep jobs. I am glad I received the training that I needed to attain employment. I am pretty proud of myself at the present moment. I made great strides to get to where I am right now. There was a time when I stole money; now I earn it. There was a time I stole my mother's car keys to get a car, and now I have my own car. There was a time when I shut my ears to the advice of adults; now I seek their wisdom and enlightenment. There was a time when I thought my way was the only way; now I understand there are many right ways. In the future, I plan to get a degree in computer science and business administration. I have confidence in my potential to achieve greatness. I have chosen to get my life together, and I would not be here speaking today if I had not made that choice. I am grateful to all the people who had patience and concern and helped me develop a faith in myself. It is my intention to use this faith to inspire youth to follow in my path.

## **Discussion**

Q: If there were one or two things that you could pinpoint as being responsible for the significant impact and the positive change in your life what would they be?

Reed: My mother divorcing my step-dad, when I received adequate treatment for my mental health problems, and music.

Q: What was the most influential thing that happened that helped you overcome being defiant?

Reed: The positive support and reinforcement from Mr. Gomez helped me get through this, and I made a conscious decision to change.

Q: Is there anything that could have helped you avoid the court system before you got involved—perhaps in school?

Reed: The curriculum was boring and not a challenge for me because I had ADHD. If the school placed me in advanced placement classes earlier it would have helped me. My mom was so blinded by love, she didn't see the problems I was having with my step-dad. If she had listened to me earlier, it would have made a difference too.

Q: Where do you see yourself ten years from now?

Reed: With a master's degree, a corporate executive position at TRW, and making six figures.

Q: Do you have any suggestions for those of us who work with youth on how to approach certain situations?

Reed: Textbook approaches may not be the most appropriate procedure in dealing with a youth. A child that has a hard time at home does not need to hear about a "conflict cycle." Deal with youth "on the real."

### **Description of promising programs for youth with mental health disabilities in the juvenile justice system**

**LaWanda Ravoira, PACE Center for Girls, Inc.**

#### Overview

PACE was established in 1985 in Jacksonville, Florida, as an alternative to institutionalization and incarceration. A typical client is a girl who has experienced an abusive environment or is "deep-ended" into the system because of a lack of gender-specific services for young women. PACE Center for Girls advocates for change and equity for girls. We advocate that girls have the right to gender-competent services and we must provide a different approach for girls because girls face different challenges than young men. PACE is a non-residential, community-based diversion program that includes five core components. The majority of the girls we serve are involved in the justice system or are on the path to the system. First and foremost, we are an education program with a Middle and High School and have a cooperative agreement with our local school boards. Most of the girls are two to four years behind in education. The academic component includes an individualized plan, and we provide comprehensive case management and counseling that incorporates family involvement. We believe that the traditional school system does not honor the learning styles of girls and young women.

#### Population served

The PACE Center provides services to girls and young women who are at risk of entering the juvenile justice system. Twenty percent of our girls are living in out-of-home placements, and many of the girls' parents are struggling with addiction and / or are incarcerated.

### National trends and statistics

- Over the last ten years, there has been an 11 percent increase in young men entering system and a 23 percent increase in girls entering the system. Although girls are still smaller in numbers, we must address the issue of girls entering the system.
- In Florida, there has been a 53 percent increase in girls being referred for delinquency, as well as a 42 percent increase in property crime arrest rates for girls. There has been a decline for boys in arrests for property crimes.
- Girls represent 29 percent of all the youth referred to the Florida DJJ.
- Up until the age of eleven, girls have a strong sense of self, are willing to take risks, and believe they have a bright future, but at the onset of adolescence, they experience a loss of self-esteem, their self-confidence drops, and test scores drop.
- 1 in 4 girls exhibit symptoms of depression.
- 1 in 4 girls are sexually abused before age 18.
- 73 percent of high school girls are victims of violence (by someone who they know or trust).
- In high school, 1 in 3 girls are involved in dating relationships characterized by violence, a hidden epidemic.
- 7 million suffer from bulimia and anorexia.

### Services offered

- *Smart Talk* is a program that addresses the development of communication skills and focuses on when to use appropriate language in different settings. This multi-faceted program incorporates an array of skills and builds academic performance in a way that honors girls' strengths.
- The *Save Our Sisters* program is a health module. We learned that the girls are afraid to ask questions while at the public health clinic, and we provide them with a list of questions to ask while they have health examinations.
- *Safety Smart* is a program that teaches girls about how to stay safe.
- *On My Own* focuses on independent living skills.
- *Nine to Five on Flex Time* is a program that teaches employability skills and provides assessment, an introduction to traditional and non-traditional jobs, internship and job shadowing activities, and on-the-job training. To accomplish some of this, we have developed partnerships with businesses in the community and invite them to join our Board of Directors, which captures their interests and creates opportunities for our girls.

“We have to set a vision for young people and continue in this political climate to demand services for youth in the juvenile justice system.”

--- *LaWanda Ravoira, PACE Center for Girls, Inc.*

## **Becky Anderson, Project CRAFT**

### Overview

Developed and initiated by the Home Builders Institute (HBI), the educational arm of the National Association of Home Builders, CRAFT is a national training program for high-risk and adjudicated youth. Community Restitution and Apprenticeship Training (CRAFT) is a non-residential program that teaches youth hands-on skills in the construction trade. Youth receive pre-apprenticeship training in residential construction trades, such as carpentry or building and apartment maintenance, job placement and follow-up services. Key elements of the CRAFT model include: (1) partnership building and linkages; (2) comprehensive service delivery; (3) community training projects; (4) industry-driven responsive training; (5) motivation, esteem building and leadership; (6) job placement, often with Home Builder Association members; and (7) follow-up services. CRAFT operates as an alternative to incarceration, intervention, or after-care programs.

### Population served

The Project CRAFT program sites in Florida include West Palm Beach, Fort Lauderdale, and Orlando. Orlando serves male and female, high-risk and adjudicated youth, aged 17 or older. Minority youth make up about 80 percent of all the youth enrolled in the program. In addition, youth with special education needs and learning disabilities are also among those served. Youth must function on a 4<sup>th</sup>-grade reading level as a criterion for admission to the program. Many of the youth that are served have mental health problems.

### Services offered

Our services range from vocational work to intensive programs for high-risk or adjudicated youth. Youth must complete 21 weeks of training, which includes extensive hands-on real work opportunities through community service projects. Through HBI's Pre-Apprenticeship Certificate Training (PACT), students learn the basics of carpentry, building and apartment maintenance, or any one of the trades. 80 percent of the program is spent on-site at a construction site.

Program staff provide on-site training and work towards helping youth reach graduation. Youth graduates are placed in related employment and / or apprenticeships, and an HBI project coordinator assists the graduate with community transition and other supportive services for six months.

Youth gain positive self-esteem from this program and can work on math, life skills, and reading development and towards a GED or a diploma. The program staff are sensitive to and accommodate gender differences for the youth involved in the program. Youth are

encouraged to process emotional challenges in their lives through some of the activities in the program, which are designed to provide a constructive, emotional outlet. 60 percent of the students we serve are severely mentally challenged, and we offer more intensive care on-site at the program office. Drug tests are conducted once to twice a week, depending upon the youths' arrest record and / or drug use history. Youth who test positive will have detailed documentation attached to their transfer papers so that they receive adequate attention in follow-up services or other settings. Additionally, follow-up services are available for one year after the youth has been placed in employment, and key players—such as parents and employers and the youth—are included in crafting and implementing the follow-up plan.

### Challenges and solutions

Social Security benefits income was seen as competing with youth enrollment in the program, although informal interviews revealed that most youth prefer to work rather than collect disability. Getting educational staff and special education services within the school system have been challenges.

The climate in Florida's Department of Juvenile Justice is not favorable, and efforts have been made to cut back aftercare services and impose more punitive sanctions for justice involved-youth. Project CRAFT initially had a high failure rate because we had no aftercare programming to support youth and keep them out of trouble. In order to address this issue, employment programs must coordinate with the school systems, juvenile justice residential programs, and legislators.

We partnered with a special education teacher full-time to work with students. Persistence and determination on the part of program staff is crucial to the program's success. Practical issues such as transportation can be barriers to youth involvement in the program or to being fully employed, so we address these issues for our students. To properly serve these youth, we have to address the multiple needs that they have.

### **Discussion**

Comment: I am pleased to hear you mention the need for changing employers' and schools' expectations regarding these kids and the need for these groups to recognize youths' special needs, disabilities, and substance abuse problems.

Q: You mentioned that you have a few young women who are in a program with mostly men. Can you speak to how you handle this gender imbalance?

Anderson: Sex education had to be added to the curriculum. We had to educate the boys as well as the girls about normal development. We have prepared the students to deal with workplace situations such as sexual harassment and maintaining professional relationships while in the workplace. Our biggest problem was trying to get space for the girls to change their clothes.

## **Claudia Lann Valore, Positive Education Program**

### Overview

Positive Education Program is based in Cleveland, Ohio and is a contract agency of the Cuyahoga Community Mental Health Board and operates under the auspices of the Cuyahoga County Educational Service Center (board of education). PEP provides integrated special education and mental health services to children from birth through 22 years of age.

PEP is licensed by the Ohio Department of Mental Health, is a founding member of American Re-education Association. Our mission is to improve the quality of life and enhance the self-sufficiency of children and youth at risk of social-emotional or behavioral problems by providing integrated mental health, educational, and supportive services using an ecological, family-focused approach. One goal of PEP is re-claiming all youth; and our programs are based on the principals of the Re-education model. We value the worth and dignity of youth and families, diversity and unity, parent and family involvement, competency building, a focus on strengths and choice, self-determination, personal responsibility, and mutual respect. Last, but not least, we value laughter and joy.

### Population served

PEP provides integrated special education and mental health services to children from birth through 22 years of age, including many children at risk for or who have had contact with the juvenile justice system.

### Services offered

PEP offers direct services to assist a wide range of children with disabilities. Programs include PEP Assist which is a training and consultation service and Connection which is a community-based case management program that serves youth (involved in at least two systems) with the goal of maintaining them in their communities and homes. Day Care Plus supports Cleveland day care centers to retain youngsters in the programs. Early Start sends home visitors to assist new mothers, and our Early Intervention Centers serve children from birth to school-age including a parent-implemented program component. Diagnostic Assessment Service makes service linkages for youth in foster care who are in danger of losing their placements. We operate two group homes for adolescent boys. Transition from School to Work is a supportive employment program for adolescents.

Our Day Treatment Centers serve school-age children and adolescents with mental health disabilities. Six centers throughout the county serve over 500 young people with serious emotional disturbance (SED) and behavior problems. The seventh program works with young people with multiple handicaps.

“The curriculum does not define what it is we do, the kids’ needs define what we will set up for their particular program.”

--- *Claudia Lann Valore, PEP*

In the Fall of 2000, we are opening a day treatment program for adolescents who have severe behavior and emotional difficulties. Our Center for Youth in Transition will specialize, allowing us to provide adolescents with a personalized and relevant curriculum to equip them with the skills they need to prepare for a successful transition to adulthood. Outcome goals of the program include helping each student to:

- Pursue a rigorous academic program leading to a diploma, GED, or functional literacy;
- Gain skills leading to employment and / or to pursuit of a career path;
- Benefit from and contribute to community life and successful relationships with others.

The program is designed to be age-appropriate, to utilize flexible scheduling in order to meet individual programming needs (e.g., work experience), and to fully engage youth with staff in designing their plans and curriculum. A variety of services and supports such as clinical intervention, case management, and follow-up are provided as well.

### **Deanne Unruh and David Montesano, Project SUPPORT**

#### Overview

Although the state of Oregon has tried to provide probation youth with a range of services, to address their individual needs and to prevent them from entering the system, incarceration rates have increased. Funding is limited, and there has been a move towards more punitive approaches such as “one strike and you’re out” in the state system, as well as a restrictive law related to trying youth as adults.

Project SUPPORT is currently in a pilot phase, although we have developed a sustainability plan which involves substantial systems change to embed this program in state agencies. The program involves a collaborative effort between the Department of Vocational Rehabilitation, the Department of Education, and the Oregon Youth Authority. The outcomes anticipated from the program include lower recidivism, higher employment, and better access to services.

#### Population served

This program exclusively serves youth with disabilities exiting out of juvenile corrections facilities in the state of Oregon when the disability presents itself as a barrier to employment and there is a reasonable possibility that, through intervention and accommodation at the work site, this youth could be employed.

#### Services offered

Interventions and accommodations are developed by transition specialists, who serve as advocates for the youth. The Oregon system is regionally based, with 4 transition camps and one boot camp. Youth are able to leave these facilities and work to pay restitution. In

developing the program, we conducted needs assessments in three urban sites and held forums to identify supports and barriers consistent with our discussion today. Two groups were assessed: probation violators and soon-to-be-released youth. The youth emphasized their relationships (with peers and families) as important sources of support, indicating that just being "plugged into" services isn't enough. Youth see their own behavior—especially their drug use—as a barrier.

Ten percent of the funding for this program comes from the Oregon Youth Authority. To this is added the education funds which are allocated per youth in a school district. Because disabled youth get twice the allocation, by serving eight youth in the community for one year we are able to obtain enough resources to hire one transition specialist. Legislation has been developed to support this program, and the Governor's Task Force on Youth includes juvenile justice which reinforces the message that child-serving systems must cooperate and share resources. Internal barriers to collaboration are great, however. The University, as the facilitator of the process, often serves as a scapegoat.

## **Discussion**

**Q:** Would collaboration be easier if one agency took lead?

Montesano: No, we think in another year those barriers will dissipate and a more cooperative approach will emerge.

**Q:** I want to commend your efforts to conduct regional market research to determine which training opportunities to offer to youth.

Montesano: In Oregon, youths' primary source of employment was through the family. Unfortunately, most of the youth with disabilities are not as well connected, and they lack this kind of family advocacy.

**Q:** Are Measure 11 youth [those automatically transferred to the adult system] served by your program?

Montesano: No, we are not serving kids who are charged as adults because of the 5-year mandatory sentencing. We plan to expand, however, to all the institutions in the state, and then to probation, then to youth in the adult facilities. We are concerned about Measure 11.

**Q:** Can you describe the legislation that supports your program?

Montesano: For ten years, there has been a movement towards community-based treatment for youth and legislative support for diversion and wraparound.

## General discussion about promising programs

Q: This is a question for each of the speakers: How many have parent support groups as part of the program, so those parents with similar problems can strategize together?

Ravoira: Parent involvement is integral to the PACE Program. We have also started to provide services for parents, and now there is a GED program that we run in the evenings and on weekends to help parents. We are working with the entire family system to help each girl define who her family is.

Comment: My focus is on adolescent special healthcare needs in the transition to adulthood. We have a national grant program running [at the Maternal and Child Health Bureau], and I heard several comments made today about SSI and sexuality for youth with chronic health conditions. We have resources available on the above and on understanding the 504 statute and how it relates to the State Title V program, focusing on children with special healthcare needs, key transitional issues for youth with disabilities, and the work incentive programs.

Comment: Have you been involved with youth who have used Social Security Work Incentives programs? The Social Security Administration is in the process of hiring new benefits counselors and employment support representatives across the U.S. in our field offices. These people will be working at one-stop centers providing assistance on work incentives, and they will look at ways to effectively transition youth that are on SSI to utilize benefit structures, save money, and increase substantial gainful activities.

Q: I have a question directed to Project CRAFT. What was the response from the industry? Any barriers?

Anderson: We had an overwhelmingly positive response from the industry. They want us to produce more graduates. The only barrier we've encountered is the child labor law; youth under age 16 cannot work with power tools and need waivers to be employed. In response to this, we place youth in jobs that they are able to work in until they reach the age at which they can work with specialized tools.

Q: Have employers been flexible regarding accommodations to individual disability needs?

Anderson: Yes, the labor shortage is so significant that it makes a tremendous difference for us. There is a need for a concrete description of accommodations that employers might have to make for youth, and we have to be up-front with employers. We also need to familiarize the Department of Juvenile Justice with this issue.

Q: How does stigma affect the treatment of people with disabilities in the justice system?

Ravoira: For those of us who work with youth, we have to be aware of the complexity of the youth we are serving and take into consideration the combination of issues including race, dual-diagnosis, substance abuse, and family issues. We fight stigma all the time and we work to prevent our kids from being labeled. Once we label kids, stigma follows them, and in some instances youth have to remain in alternative schools because of this.

Q: Are any of your organizations trying to work with the media to change perceptions about children in the juvenile justice system?

- A group that may be helpful is the Education Writer's Association. They have educational and training programs for reporters on different issues, including juvenile justice, and they work to increase the knowledge base for reporters. In states, NCSL offers a policy educational training program for state capital reporters, and this year's theme is school violence. We should work with reporters to help them identify and learn the facts.
- OJJDP has worked and continues to work with the media, primarily through the Ad Council. We help local programs develop media approaches and have designed technical assistance materials to get positive information out in the media. It is difficult to stop negative media coverage and the media feeding frenzy around high-profile news stories.
- Each month, our state Department of Juvenile Probation writes an article. We found that if you only interact with the media when there is a problem, they will not always be supportive. We must do better in covering juvenile justice even when nothing "extreme" is happening. Keep up a dialogue with reporters, otherwise you won't get a positive story out.
- The Academy for Educational Development provides a training program on how to speak to the media and put a positive spin on your program to counteract the negative spins on news stories.

### **NMHA closing comments**

We have been talking about challenges and issues on multiple levels: for all kids in the justice system, for all kids with disabilities, and for a much more specific group—kids with mental health disabilities in the juvenile justice system. This discussion illustrates how all these problems are layered on top of each other and that many children face multiple disabilities and disadvantages that might go unrecognized. As this conversation has illustrated, we need to talk about each of these interrelated problems. I want to refocus the discussion on our target group of interest, however, as we get closer to developing our policy recommendations—those youth who have mental health needs and who are juvenile justice system involved.

## **Context for recommendations: Activities of the Presidential Task Force on Employment of Adults with Disabilities**

**Michael Reardon, Senior Public Health Advisor, Special Assistant to the Executive Director**

The Task Force was established by Presidential order in 1998 to examine programs that the government has administered and funded related to adults and youth with disabilities. The Task Force created six Committees, as well as one subcommittee on Expanding Employment Opportunities for Young People with Disabilities (associated with the Committee on Access to Employment and Lifelong Learning). Several members of this Subcommittee have been present at this meeting, including co-chair Curtis Richards, Deputy Assistant Secretary, Office of Special Education.

Activities of this subcommittee include a National Transition Summit on Young People with Disabilities to be held this June and which will include youth, federal government agency representatives, private providers, and state government agencies (150-200 attendees). The *Youth to Work* initiative allows us the opportunity to incorporate our recommendations into a range of possible legislative and policy changes. Our goal is to increase internship opportunities, increase the ability of individuals to receive post secondary education, encourage market research, look at best practices, and make available competitive grants. There is also an opportunity for youth to be involved with the Task Force during the Youth Leadership Summit, June 24-28<sup>th</sup> in Bethesda, Maryland.

## **Closing discussion**

During the final segment of the meeting, participants were asked to identify significant policy barriers and recommendations to address the employment and training needs of youth with mental health disabilities in the juvenile justice system. The following summarizes this discussion, highlighting barriers as well as policy recommendations at the Federal, state, and local levels.

## Meeting participants

Rebecca Anderson, Project CRAFT

Kristin Apgar, Washington Business Group on Health

Rhonda Basha, Presidential Task Force on Employment of Adults with Disabilities

David Brown, National Youth Employment Coalition

Christa Bucks Camacho, Office of Employment Support Programs, Social Security Administration

Kurt Bumby, Missouri Division of Youth Services

Hazel Cagunung, National Mental Health Association

Donna Davidson, TBI Technical Assistance Center

Edward DeJesus, Youth Development and Research Fund

Douglas Dodge, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice

Derrick Dolphin, Job Corps National Office

William East, National Association of State Directors of Special Education

Phyllis Eisen, National Association of Manufacturers

Michael Faenza, National Mental Health Association

Mary Fairchild, National Conference of State Legislatures

Heather Fuentes, Safe Schools / Healthy Students Action Center

Lili Garfinkel, PACER Center

Tom Gloss, Maternal and Child Health Bureau, Health Resources and Services Administration

Tom Gullotta, Child and Family Agency of Southeastern Connecticut

Tom Hanley, Office of Special Education and Rehabilitative Services, U.S. Department of Education

Michele Herman, Center for Mental Health Services, SAMHSA

Richard Horne, Presidential Task Force on Employment of Adults with Disabilities

Robert Jackson, Opportunities Industrialization Centers of America, Inc.

Sonia Jurich, American Youth Policy Forum

Patrick Kanary, Ohio Department of Mental Health

Claudia Lann Valore, Positive Education Program  
Peter Leone, University of Maryland  
Christina Lo, Office of Youth Opportunities, U.S. Department of Labor  
Thomas MacLellan, National Governors Association  
Karen Mahler, Center for Alternative Sentencing and Employment Services  
Donald Marx, Chesapeake Bay Youth Conservation Corps  
Jacki McKinney, Federation of Families for Children's Mental Health  
William McKinnon, Presidential Task Force on Employment Adults with Disabilities  
David Montesano, University of Oregon  
Thomas Murphy, Office of Juvenile Justice and Delinquency Prevention, U.S.  
Department of Justice  
Rebecca Ogle, Presidential Task Force on Employment of Adults with Disabilities  
Roy Praschil, National Association of State Mental Health Program Directors  
LaWanda Ravoira, PACE Center  
Michael Reardon, Presidential Task Force on Employment of Adults with Disabilities  
Jeremy Reed, Positive Education Program  
Curtis Richards, Office of Special Education and Rehabilitative Services, U.S.  
Department of Education  
Susan Robsenblum, National League of Cities  
The Honorable Gerald Rouse, National Council of Juvenile and Family Court Judges  
John Savage, Center on Juvenile and Criminal Justice  
Christine Siegfried, National Mental Health Association  
Stephen Spector, Children and Adults with Attention Deficit Hyperactivity Disorders  
Richard Talty, New Jersey Department of Probation Services  
Dennis Torbett, Home Builders Institute  
Joseph Tulman, University of the District of Columbia  
Deanne Unruh, University of Oregon  
Carol Valdivieso, Academy for Educational Development  
Psyche Williams Forson, Job Corps National Office  
Jenifer Wood, National Mental Health Association  
Glenn Young, Office of Vocational and Adult Education, U.S. Department of Education  
Laurie Young, National Mental Health Association

## Additional resources

### **Presidential Task Force on Employment of Adults with Disabilities**

U.S. Department of Labor  
200 Constitution Avenue, NW, Suite S-2220  
Washington, DC 20210  
Phone (202) 693-4939  
TTY (202) 693-4920  
Fax (202) 693-4929  
E-mail: [ptfead@dol.gov](mailto:ptfead@dol.gov).

*Publication available:* "Recharting the Course: If Not Now, When? The Second Report of the Presidential Task Force on Employment of Adults with Disabilities."

### **Juvenile Court Centennial Initiative**

1325 G Street NW, #770  
Washington, DC 20005  
Phone (202) 637-0590  
Fax (202) 347-0493  
Email: [Secondchances@earthlink.net](mailto:Secondchances@earthlink.net)

### **Justice Policy Institute**

The Center on Juvenile and Criminal Justice  
1234 Massachusetts Ave, NW, Suite C1009  
Washington, DC 20005  
Phone (202) 737-7270  
Fax (202) 737-7271

*Publication available:* "Second Chances. Giving Kids a Chance to Make a Better Choice."

For a copy, visit [www.cjcj.org](http://www.cjcj.org) and download.

### **Juvenile Justice Center**

American Bar Association  
740 15th Street, NW, 10th Floor  
Washington, DC 20005  
Phone (202) 662-1506  
Fax (202) 662-1501

*Publication available:* "A Call for Justice"

### **David A. Clarke School of Law**

University of the District of Columbia  
4200 Connecticut Avenue, NW  
Building 38, 2nd Floor  
Washington, DC 20008  
Phone (202) 274-7317

Fax (202) 274-5583

Email: [jtulman@law.udc.edu](mailto:jtulman@law.udc.edu)

*Publication available:* "Special Education Advocacy Under the Individuals with Disabilities Education Act (IDEA) For Children in the Juvenile Delinquency System".

**PACER Center**

4826 Chicago Avenue South  
Minneapolis, MN 55417-1098

Phone (612) 827-2966

TDD (612) 827-7770

(800) 53-PACER (in MN)

(888) 248-0822 (nationally)

Email: [pacer@pacer.org](mailto:pacer@pacer.org)

[www.pacer.org](http://www.pacer.org)

*Publication available:* "Unique Challenges, Hopeful Responses: A Handbook for Professionals Working with Youth with Disabilities in the Juvenile Justice System." (also available on video)

**Positive Education Program**

3100 Euclid Avenue

Cleveland, OH 44115

Phone (216) 361-4400

Fax (216) 361-8600

[www.pepcleve.org](http://www.pepcleve.org)

**The National Center on Education, Disability, and Juvenile Justice**

University of Maryland

Department of Special Education

1308 Benjamin Building

College Park, MD 20742

Phone (301) 405-6489

Fax (301) 314-9158

[www.edjj.org](http://www.edjj.org)

**National Criminal Justice Reference Service (NCJRS)**

P.O. Box 6000

Rockville, MD 20849-6000

Phone (800) 851-3420 or (301) 519-5500

TTY (877) 712-9279 or (301) 947-8374

[www.ncjrs.org](http://www.ncjrs.org)

*Publications available:* "Preventing Crime: What Works, What Doesn't, What's Promising: A Report To the United States Congress" and "Juvenile Offenders and Victims: 1999 National Report"

**National Youth Employment Coalition**  
1836 Jefferson Place, NW  
Washington, DC 20036  
Phone (202) 659-1064  
Fax (202) 659-0399

**Home Builders Institute**  
1090 Vermont Avenue, NW, Suite 600  
Washington, DC 20005  
Phone (202) 371-0600  
Fax (202) 898-7777  
*Publication available:* "Employment and Training for Court Involved Youth Report"

**PACE Center for Girls, Inc.**  
112 West Adams Street, Suite 500  
Jacksonville, FL 32202  
Phone (904) 358-0550  
Fax (904) 358-0660

**Project SUPPORT**  
University of Oregon  
Room 175  
College of Education 5260  
Eugene, OR 97403-5260  
Phone (541) 346-1483  
Fax (541) 346-1411

**National Mental Health Association**  
1021 Prince Street  
Alexandria, VA 22314  
Phone (800) 969-6642  
Fax (703) 684-5968  
[www.nmha.org](http://www.nmha.org)

To obtain a copy of the full report on "Addressing the Training and Employment Needs of Youth with Mental Health Disabilities in the Juvenile Justice System," please contact the National Mental Health Association at (800) 969-NMHA or TTY (800) 433-5959 or visit our web site, [www.nmha.org](http://www.nmha.org).

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**Author(s):** Hazel Cagungun Moran

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